Rev. 4/99	M IDEP	ISS	OL		PLI	SION OF HEA	LTH - ST	•			•	205	-63-0 STATE FILE	20025 E NUMBER
1. PLACE OF BEATH COUNTY Jack Son Jack So	DO NOT WRITE		AME	NDED	-	legistration District No	<i></i>	_	gistration Di	istrict No. 1994	Registrar's No.		<u> </u>	
ACCOON COUNTY (Founded corporate limits, pive TOWNSHIP only) 1	ON THIS STUB					PLACE OF DEATH		7 1963			2. USUAL RESIDEN	ICE (Where deceased	lived. If instituti	ion: Residence before
Description of printing and property in the control of the printing of the pri			$ \cdot $			a. COUNTY	Jackson	a			a. STATE Mis	SOUTE COUNT	Jackson	admission)
ADDRESS 7924 East 82nd St. Ves No B No. B	Rev. 4/59	12	2	1	1-	b. CITY (If outside.co	rporate limits, giv	e TOWNSHIP or	nly) L	ength of stay in 1b	c. CITY		UGGESO,	
ADDRESS 7924 East 82nd St. Ves No B No. B	_	쀻	1		1	TÖŴN Kan	sas City	7		2 Weeks	tŏŵn Ka	nsas City	7 38.	Yes 🎮 No 📋
A	1	Ψ	Į.		1	HOSPITAL OD .	• • •	-	-	Inside Limits	d. STREET	(If cuts	ide, give location)	Reside on Farm
A / SAME OF DECASE FIRST Middle Latt	22 X 2-8	AT	7			INSTITUTION J	ackson (County	Hosp	Y+* X No 🗆	79	24 East 8	32nd St.	Yes 🖸 No 🍱
S. SEX 6. COLOR OR RACE 7. Married Divorage 18. Divorage		누는	+-		I -		First	1	, Mic	die				av Year
5. SEX S. COLOR OR RACE 7. Married 8. DATE OF BURTH 9. AGE (last birridary) 2. AGE (la						(Type or print)	רים	ma			Canasa	OF		
Female White Wildows II. Divorced Solver Color Solver Col	4 1	- 1			I -	S. SEX			Married 🗆	Never Married [7]	, 		day) IF UNDER 1	YEAR IF UNDER 24 HR
Alfred Rich Bobbitt Saraha R. Pugh		ì	စ္ခ				1		_	_		1 .		ays Hours Min.
3. SALAMENT NAME 13. ACTION OF AUSTRALE O	<u></u>		2	l l	٦	. USUAL OCCUPATION	(Give kind of wo	rk done 10b.	KIND OF BU	SINESS OR INDUSTR	Y 11. BIRTHPLACE (City and state or cour	ntry) 12. CITIZEN	OF WHAT COUNTRY
15. WAS DECEASED EVER IN U.S. ARMED FORCES? 16. SOCIAL SECURITY NO. 17. INFORMANT MTS. MATY Westfall 7924 B. 82nd. St. 18. WAS DECEASED EVER IN U.S. ARMED FORCES? 19. Conditions, if any above cause per line 10. Conditions, if any above cause (a) stating the unders. 10. DUE TO (b)	6	¥	1.1	 		duling USE WILE	ng life, even if re	tired)	None		Iow	a	U.S.	Α .
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IMMEDIATE CAUSE (a) 12/77-0 13 15 15 15 15 15 15 15			1 1		· c						Mrs. Mary	Westfall	7924 E. 82	nd. St.
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which gave rise to above cause (a). stating the under: STATE	11				1	,			-	~		-	·	
With give in a to the cause (a). PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal part iii. Here a pregnancy in last 90 days. PART III. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal part iii. Here a pregnancy in last 90 days. PART III. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH but not related to the terminal part iii. Here a pregnancy in last 90 days. PART III. Here also were there a pregnancy in last 90 days. PERFORMED? PE	1207		ပြီ			Condition		DUE TO (b)	Drain	. Item	Danges			10001
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NOT WHILE AT WORK Signature Solution Solution			j		₹:	204 INJURY OCCURR	ED 20	e. PLACE OF IN	JURY (e.g.,	in or about home,	20f. CITY, TOWN, OR	LOCATION	COUNTY	STATE
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31a. BURIAL (REMATION) REMOVAL (REMATION) S-25-1963 Fasken Cemetery Carthage 24. FUNERAL DIRECTOR ADDRESS 25. DATE RECD. BY LOCAL REG. 26. REGISTANT SIGNATURE	F	ş				, , , , , , , , , , , , , , , , , , ,	1)/1/12/12	William	NAME !	F CEMETERY OR CPI				
Removal 5-25-1963 Fasken Cametery ADDRESS 24. FUNERAL DIRECTOR ADDRESS 25. DATE RECD. BY LOCAL REG. 26. REGISTANT SIGNATURE CREEKEN Hiptors REVIOUS MARKEN HIPTORS REV		o o			2	REMOVAL (Specify)	' ⁻	1				_		Ma
GERENON Hintons Revious. Mo.		Ž	ابي			Removal	<u> 5-25-19</u>	ADDRESS	asken	25. DA	TE RECD. BY LOCAL R	EG. 26. REGISTA	SIGNATURE	
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(Licensed Embalmer's Statement on Reverse Side)

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TATEMENT BY LICENSED EMBALMER

r by		, Student Embalmer No				
_	ý personal supervision.	Signed Forest D. Coldansus				
tudent	Signature of Student Embalmer	Signed				
	•	Licensed Embalmer No. 42/4				
	:	P. O. Address / C Desc.				

Note: The above MUST BE SIGNED BY THE LICENSED EMBALMER in his OWN HANDWRITING. (Failure to comply with the above constitutes grounds for revocation of license).

If embalined by a STUDENT, he also shall sign in his OWN handwriting.

If this body is not embalmed, fact should be so stated above.